

**PATENT**

**Attorney Docket: 7044-X07-060**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Appln. of: ALINSKI, Zahar

Group Art Unit: 3671

Appln. No.: 10/595,512

Confirm No.: 1892

Filed: April 25, 2006

For: REVOLVING APPARATUS FOR AGRICULTURE PRODUCTS CULTIVATION  
BEDS

**SUPPLEMENTAL APPLICATION DATA SHEET**

**APPLICATION INFORMATION**

Application number:: 10/595,512  
Filing Date:: APRIL 25, 2006  
Application type:: REGULAR  
Subject Matter:: UTILITY  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?::  
Number of CD disks::  
Number of copies of CDs::  
Sequence submission?::  
Computer Readable Form  
(CRF)?::  
Number of copies of CRF::  
Title line one:: REVOLVING APPARATUS FOR  
AGRICULTURE PRODUCTS CULTIVATION  
BEDS  
Attorney Docket Number:: 7044-X07-060  
Request for Early Publication?::  
Request for Non-Publication?::

**Suggested Drawing Figure::**

**Total Drawing Sheets::** 13

**Small Entity?::** YES

**Latin name::**

**Variety denomination name::**

**Petition included?::**

**Petition Type::**

**Licensed US Govt. Agency::**

**Contract or Grant Numbers::**

**Secrecy Order in Parent Appl.?::**

#### **APPLICANT INFORMATION**

**Applicant Authority Type::** INVENTOR

**Primary Citizenship::** ISRAELI

**Country::** ISRAEL

**Status::**

**Given Name::** ZAHAR

**Middle Name::**

**Family name::** ALINSKI

**Name Suffix::**

**City of Residence::** ISRAEL

**State or Province**

**Of Residence::**

**Country of Residence::** ISRAEL

**Street of mailing address::** 9/1 ZOFIT STREET

**City of mailing address::** ARAD

**State or Province of**

**Mailing address::**

**Country of mailing**

**address::** ISRAEL

**Postal or Zip Code**  
of mailing address:: 89076

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#### **CORRESPONDENCE INFORMATION**

##### **Correspondence Customer**

Number:: 27317  
Name:: MARTIN FLEIT  
Street of mailing address:: 21355 E. DIXIE HIGHWAY, SUITE 115  
City of mailing address:: MIAMI  
State or Province of mailing  
address:: FLORIDA  
Country of mailing address:: USA  
**Postal or Zip Code of mailing**  
address:: 33180  
Phone number:: 305-830-2600  
Fax Number:: 305-830-2605  
E-Mail address:: MFLEIT@FGGBB.COM

#### **REPRESENTATIVE INFORMATION**

Representative customer number:: 27317

#### **DOMESTIC PRIORITY INFORMATION**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	<u>A 371 of</u> <u>International</u>	<u>PCT/IL2004/000976</u>	<u>2004-10-26</u>

## FOREIGN PRIORITY INFORMATION

Country::	Application number::	Filing Date::	Priority Claimed::
IL	PCT/IL2004/000976	2004-10-26	YES
IL	158601	2003-10-26	YES

## ASSIGNMENT INFORMATION

Assignee name::

Street of mailing

Address::

City of mailing address::

State or Province of

Mailing address::

Country of mailing

address::

Postal or Zip Code

Of mailing address::

## SIGNATURE

A signature of the applicant or representative is required in accordance with 37 CFR 1.33 and 10.18. Please see 37 CFR 1.54(d) for the form of the signature.

Signature::



First Name:: PAUL

Middle Name:: D.

Last Name:: BIANCO

Reg. No.: 43,500

Date:: 2008-12-09